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1FW/B#

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7590

07/12/2004

Martin J. Moran, Esquire  
Eaton Electrical, Inc.  
Technology & Quality Center  
170 Industry Drive, RIDC Park West  
Pittsburgh, PA 15275-1032

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

SCOTT A. ROSS	(Depositor's name)
<i>[Signature]</i>	(Signature)
9/23/04	(Date)

09/29/2004 FFAHAI3 00000108 050275 10693768

01 FC:1501 1330.00 DA  
02 FC:1504 300.00 DA

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/693,768	10/24/2003	Robert M. Slepian	02-EDP-282	2187

TITLE OF INVENTION: CIRCUIT BREAKER INCLUDING A FLEXIBLE CANTILEVER LEVER FOR SNAP CLOSE OPERATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	10/12/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
FRIEDHOFFER, MICHAEL A	2832	200-400000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. MARTIN J. MORAN  
2. \_\_\_\_\_  
3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

EATON CORPORATION

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

CLEVELAND, OHIO

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

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Deposit Account Number 05-0275 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☒ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

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(Authorized Signature)

(Date)

*[Signature]*

7/28/04

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